

VIC Consent to Use AI Note-Taking During Appointments Minors

Valley Integrative Chiropractic

To help me stay fully focused on you during your appointment and make our time together more effective, I use a secure AI-based note-taking tool called **Heidi**. This tool helps transcribe and organize our conversation into a clinical note so I can spend less time typing and more time connecting with you.

What You Should Know:

- **Purpose of Heidi:**

Heidi is a HIPAA-compliant tool that listens during our appointment to create a written summary of what we discuss. It doesn't make decisions about your care—that's entirely up to me. It simply helps streamline documentation so I can be more present with you.

- **No Recording is Saved:**

Nothing is ever recorded or stored as audio. Heidi transcribes as we talk, and once the note is created, the original text is securely deleted.

- **Data Privacy & Protection:**

Heidi removes personal identifiers (like your name or phone number) before processing any notes. All data is encrypted and stored securely. You remain in full control—if I delete the note, it's also deleted on Heidi's side.

- **Your Consent is Optional:**

You're welcome to opt out at any time, and doing so won't impact your care in any way. Just let me know.

- **Why I'm Using This:**

We all use tech in small ways—whether it's a health-tracking watch or a phone that responds to "Hey Siri." This is no different. Using a tool like Heidi just means I can be more attentive, and your notes will be more accurate and thorough.

Data Privacy and Confidentiality:

Your privacy is of paramount importance. The AI tool complies strictly with Health Insurance Portability and Accountability Act (HIPAA) guidelines, ensuring the security and confidentiality of your data.

By signing below, you acknowledge the following:

- 1. You've been informed that I may use an AI assistant (such as Heidi or a similar HIPAA-compliant tool) during your appointment to help create clinical notes.
- 2. You understand that your personal information is protected, de-identified before being processed, and securely stored.
- 3. You give permission for this tool to be used during your appointments, with the understanding that you may withdraw your consent at any time.

Should you have any questions or concerns, please do not hesitate to discuss them with me.

Parent or Guardian Signature
I am the parent or legal guardian of the above-named patient, and I consent to the use of an AI Assistant during my minor's appointments. I affirm I have the legal right to make these decisions.

X

Print name:

Date: